



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application No.	10/686,962
Filing Date	October 15, 2003
First Named Inventor	Peter Hazucha
Art Unit	2816
Examiner Name	My Trang Ton
Attorney Docket Number	42P15901
Total Number of Pages in This Submission	19

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	- Check in the amount of \$120.00
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	- Return Receipt Postcard
<input type="checkbox"/> PTO/SB/08		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

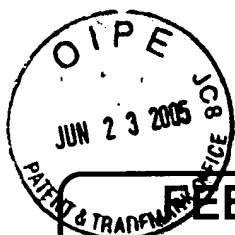
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Paul A. Mendonsa, Reg. No. 42,879
	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	June 21, 2005

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Rachael L. Brown
Signature	
Date	June 21, 2005



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Complete if Known

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☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 120.00

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____
☐ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION

1. EXTRA CLAIM FEES

1. EXTRA CLAIM FEES		Extra Claims	Fee from below	Fee Paid							
Total Claims	<table><tr><td>16</td></tr></table>	16	21*	<table><tr><td>0</td></tr></table>	0	X	<table><tr><td>50.00</td></tr></table>	50.00	=	<table><tr><td>\$0.00</td></tr></table>	\$0.00
16											
0											
50.00											
\$0.00											
Independent Claims	<table><tr><td>3</td></tr></table>	3	3*	<table><tr><td>0</td></tr></table>	0	X	<table><tr><td>200.00</td></tr></table>	200.00	=	<table><tr><td>\$0.00</td></tr></table>	\$0.00
3											
0											
200.00											
\$0.00											
Multiple Dependent						=					

Large Entity	Small Entity
Fee Code	Fee Code
1202 50	2202 25
1201 200	2201 100
1203 360	2203 180
1204 300	2204 150
1205 300	2205 150

SUBTOTAL (1) (\$) 0.00

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051 130		2051 65		Surcharge - late filing fee or oath
1052 50		2052 25		Surcharge - late provisional filing fee or cover sheet.
2053 130		2053 130		Non-English specification
1251 120		2251 60		Extension for reply within first month
1252 450		2252 225		Extension for reply within second month
1253 1,020		2253 510		Extension for reply within third month
1254 1,590		2254 795		Extension for reply within fourth month
1255 2,160		2255 1,080		Extension for reply within fifth month
1401 500		2401 250		Notice of Appeal
1402 500		2402 250		Filing a brief in support of an appeal
1403 1,000		2403 500		Request for oral hearing
1451 1,510		2451 1,510		Petition to institute a public use proceeding
1460 130		2460 130		Petitions to the Commissioner
1807 50		1807 50		Processing fee under 37 CFR 1.17(q)
1806 180		1806 180		Submission of Information Disclosure Stmt
1809 790		1809 395		Filing a submission after final rejection (37 CFR § 1.129(a))
1810 790		2810 395		For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify) _____

SUBTOTAL (2)

(\$) 120.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Paul A. Mendonsa	Registration No. (Attorney/Agent)	42,879	Telephone	(503) 439-8778
Signature		Date	06/21/05		